

## Company Name

Company Address  
City / State  
Country  
Zip code  
Telephone

# TIME SHEET DOVICO™ SOFTWARE

**Employee Name:**

**Title:**

**Employee Identification #:**

**Employee Type:**

**Department / Team:**

**Active Supervisor:**

Date	Start Time	End Time	Regular Hrs.	Overtime Hrs.	Total Hrs.
<b>WEEKLY TOTALS:</b>					

Employee Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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